



PATENT  
Atty. Dkt. No. 83336.0001  
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Simon QIN, et al.

Serial No.: 09/885,499

Filed: June 19, 2001

For: BACKUP/RECOVERY SYSTEM AND METHODS  
REGARDING THE SAME

Art Unit: 2114

Examiner: Bonzo, Bryce P.

Confirmation No.: 4469

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
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February 17, 2005

Date of Deposit

Kimberly Yee

Name  
Kimberly Yee, 02/17/2005  
Signature Date

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment Under 37 C.F.R. § 1.116 in the above-identified application.

☒ Small entity status has been claimed. See 37 CFR § 1.27.

☒ A Petition for Extension of Time is enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	8	-	20**	0	LG=\$50 SM=\$25	\$25	\$ 0
INDEPENDENT CLAIMS FEE	1	-	3***	0	LG=\$200 SM=\$100	\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS			\$
TOTAL							\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

☒ A check in the amount of \$ 60.00 to cover the extension fee is enclosed. A copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

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